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CONFIRMATION NO. 3423

<b>SERIAL NUMBER</b> 09/640,966	<b>FILING OR 371(c) DATE</b> 08/16/2000 <b>RULE</b>	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2623	<b>ATTORNEY DOCKET NO.</b> SEDN/245CIP6
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/219,076 07/18/2000 which is a CIP of 09/583,388 05/30/2000  
which is a CIP of 09/585,263 06/02/2000 *Appel Brief*  
which is a CIP of 09/562,491 05/01/2000 ABN *mmh*  
which is a CIP of 09/359,560 07/22/1999 ABN

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
10/30/2000

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 38	<b>TOTAL CLAIMS</b> 38 18	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>Michael W. Boze</i> Examiner's Signature	<i>mmh</i> Initials			

## ADDRESS

56015

## TITLE

Music interface for media-rich interactive program guide

<b>FILING FEE RECEIVED</b> 622	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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